

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED

2012 DEC 17 PM 12:36

Office Use Only

FEC MAIL CENTER

12FE4M5

1. NAME OF  
COMMITTEE (in full)

☐

(Check if name  
is changed)

Example: If typing, type  
over the lines.

AnniePAC

ADDRESS (number and street)

1 Park Row, 5th Fl

☐

(Check if address  
is changed)

Providence

RI

02903

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

fec@cfo-compliance.com

☐

(Check if address  
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

none

☐

(Check if address  
is changed)

2. DATE

12

08

2012

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

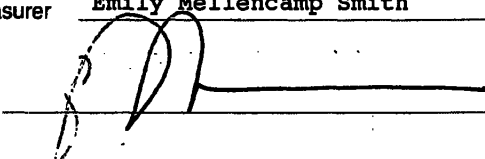
AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Emily Mellencamp Smith

Signature of Treasurer



Date

12

10

2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2009)

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